# Brownsville Independent School District

## Research Proposal Application Form B

Title of Study

### Main Project Contact Person

Title First Name Last Name

### Project Information

Overall Project Purpose

Are you proposing implementation of a program?

Yes No

If "Yes", select type of program or programs? Instructional

Professional Development Student Services

Other

*If your research proposal will implement a program, please attach a copy of your curriculum or other project materials.*

***UPGRADE TO ADOBE READER X IF POSSIBLE***

*To add attachments go to View-Comment- Annotations-Attach File from the side panel. It*

*will open dialog box to pick file. Place in shaded box to the right of Project Materials.*

Project Materials

### Project Director or Supervising Professor

Title

First Name

Last Name

Organization Type of Organization

Address

City State Zip Phone

Email

### Data Requirements

Are you requesting existing student data records (e.g., test scores, attendance, etc.)?

If "Yes", please note that you will need to submit a BISD Public Information request for Open Records.

Yes No

Are you requesting permission to collect data directly from parents, students, or staff? If "Yes", please attach Form G, (Time Requirement Form G).

Yes No

*To add attachments go to View-Comment-Annotations-Attach File*

*from the side panel. It will open dialog box to pick file. Place in shaded box to the right of Form G.*

Form G

Please check all grade levels to be used in your study.

Prekindergarten

2nd Grade 5th Grade 8th Grade 11th Grade

Kindergarten 1st Grade



3rd Grade 4th Grade

6th Grade 7th Grade

9th Grade 10th Grade

12th Grade

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Brownsville Independent School District**  Research Proposal Application Form B | | | | |
| **IV. Data Requirements (continued)** | | | | |
| Please check all schools you wish to include in your study.  All Elementary Schools All Middle Schools All High Schools All Alternative Campuses | | | | |
| **Elementary Schools** | | | | |
| Aiken Burns Cromack Gallegos Hudson  Morningside Peña Resaca Southmost Yturria | Benavides Canales Del Castillo  Garden Park Keller  Ortiz Perez Russell Vermillion | Breeden Castañeda Egly Garza Longoria  Palm Grove Pullam Sharp Victoria Hgt. | Brite Champion El Jardin Gonzalez Martin Paredes Putegnat Skinner Villa Nueva |  |
| **Middle Schools** | | | | |
| Besteiro Lucio Stell | Cummings Manzano Stillman | Faulk Oliveira Vela | Garcia Perkins |  |
| **High Schools** | | | | |
| Hanna Rivera | Lopez Veterans | Pace BECHS | Porter |  |
| **Alternative Campuses** | | | | |
| Brownsville  Academic Center (BAC) | Brownsville  Learning Academy (BLA) | Lincoln Park School |  |  |

|  |
| --- |
| **Brownsville Independent School District**  Research Proposal Application Form B |
| **V. New Data Collection** |
| For a study collecting new data, you must obtain consent from all participants. If your research will obtain or  collect identifiable information on student participants (e.g., names, student identification numbers, or any other data that can be used to identify students directly or indirectly) you must receive **active parental consent**. Provide copies of **consent forms** as part of your application. Consent forms used for both parents and students must be written in both English and Spanish.  Parental Consent (Form H) :  Completed form(s) will be returned to  **Brownsville Independent School District**  Assessment, Research and Evaluation 708 Palm Blvd. #210  Brownsville, Texas 78521  Please provide a copy of all **study instruments** (e.g., survey questions, interview protocol, etc.) as part of your application. |
| Does any aspect of your study pose a potential emotional or physical harm to participants?  Yes No |
| If applicable, please provide the names, job titles, and institutional affiliations of any research assistants who will collect data. |
|  |

# Brownsville Independent School District

## Research Proposal Application Form B

### Research Overviews:

**Sample Number Description (Grades, Schools, Demographics)**

Students

Staff/Others

Parents

### Participation Time Required Data to be obtained

Students

Staff/Others

Parents

### Facilities Time Required Dates Requested

Students

Staff/Others

Parents

|  |  |
| --- | --- |
| **Brownsville Independent School District**  Research Proposal Application Form B | |
| **VI. Project Overview** | |
| What hypotheses or research/evaluation questions are being investigated?  Is this a single study, one of a series, or contemplated? | |
| **VII. Research Design** | |
| Provide a brief summary of your research design, including statistical analysis procedures. If you require additional space, please send additional explanation as an attachment labeled "Research Design" with the application. Please be as detailed as possible about sampling needs, variables, and analyses required. | |
| *To add attachments go to View-Comment-Annotations-Attach File*  *from the side panel. It will open dialog box to pick file. Place in* Research Design  *shaded box to the right of Research Design.* |  |
|  | |

|  |
| --- |
| **Brownsville Independent School District**  Research Proposal Application Form B |
| **VIII. Contribution to Brownsville ISD and the Field of Education** |
| Please answer the following questions, limiting your response to the space provided: |
| 1. How will this project contribute to the Brownsville Independent School District? |
|  |
| 2. How does this project relate to Brownsville ISD's major district goals or initiatives? |
|  |
| 3. How will this project contribute to the field of education? |
|  |
| 4. What Brownsville Strategic Plan (DIP) goal does this study primarily address? |
|  |

|  |
| --- |
| **Brownsville Independent School District**  Research Proposal Application Form B |
| **IX. Additional Information** |
| How are the costs of the proposed study being funded?  By the applicant  By research grant (identify source) Other  What amount is budgeted for conducting this research in Brownsville ISD? $0.00  What amount will Brownsville ISD receive for participating in this research? $0.00  What amount is budgeted to compensate research participants? $0.00 Students  Teachers Other |
| **X. To complete your application** |
| Thank you for completing the **BISD** Research Application.  You may submit your application one of two ways:   1. Click the "Submit by Email" button below OR 2. Save your completed application as an Adobe PDF electronic file and send it as an attachment via email.   YOUR APPLICATION MUST BE SUBMITTED ELECTRONICALLY  If you submit a paper or scanned copy this will delay your application and we will contact you to request the electronic version.  **To complete your application, please submit to:**  Beatriz Hernandez  Administrator for Assessment, Research and Evaluation [bahernandez@bisd.us](mailto:bahernandez@bisd.us)  Submit by Email Print Form |